

# SCDPS Incident Report

2004-14821

NCIC Use Only

Inq.	Entd.
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Date 07/13/2004	Day of the Week <input type="checkbox"/> Sun. <input type="checkbox"/> Mon. <input checked="" type="checkbox"/> Tues. <input type="checkbox"/> Wed. <input type="checkbox"/> Thurs. <input type="checkbox"/> Fri. <input type="checkbox"/> Sat.	Time 0423 <input checked="" type="checkbox"/> am <input type="checkbox"/> pm
Location of Incident I-26 MEDIAN 63 MILE MARKER EAST BOUND		County NEWBERRY
Name of Officer M.K. HORNE	Rank CORPORAL	Badge A-20
District/Unit TROOP 2 / POST A	Duty Station POST A	Page 1 of 1

<input type="checkbox"/> Invest. Officers Report	<input type="checkbox"/> Assault Report	<input type="checkbox"/> Abandon/Stolen Vehicle Report	<input type="checkbox"/> Discharge of Firearm	<input checked="" type="checkbox"/> Incident Report
<input type="checkbox"/> Vehicle Pursuit Report	<input type="checkbox"/> Towed Vehicle Report	<input type="checkbox"/> Other:		

Status	Type	Nature of Assignment
<input type="checkbox"/> Stolen <input type="checkbox"/> Found <input type="checkbox"/> Towed	<input type="checkbox"/> Recovered <input type="checkbox"/> Suspect <input checked="" type="checkbox"/> Victim	<input checked="" type="checkbox"/> Routine Patrol <input type="checkbox"/> Special Duty: <input type="checkbox"/> Other:
<input type="checkbox"/> Vehicle <input type="checkbox"/> Pickup <input type="checkbox"/> Boat	<input type="checkbox"/> Car <input type="checkbox"/> MTC <input type="checkbox"/> Gun	<input type="checkbox"/> Riot or Crowd Control
	<input type="checkbox"/> Article <input type="checkbox"/> Comm. Veh. <input type="checkbox"/> License Plate	<input type="checkbox"/> Haz. Mat. (Check If Applicable)

<input type="checkbox"/> Complainant	Driver's or Pedestrian's Name: ALICIA MAY GOODWIN	Jailed?: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<input checked="" type="checkbox"/> Victim	Address: 304 91 CHESAPEAK DR NAWICOKE M.D 21840	Intoxicated?: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<input type="checkbox"/> Subject	Race: W Sex: F DOB: 08/30/1976	DL Number: N/A
<input type="checkbox"/> Runaway	Height: 5'3 Weight: 105 Hair: BLK Eyes: GRN	Scars, Tattoos, Etc.: N/A
<input type="checkbox"/> Wanted	Occupation: UNKNOWN	Home Phone: N/A Work Phone: N/A
<input type="checkbox"/> Arrest	Vehicle Make: N/A Model: N/A	Lic/Yr: N/A State: N/A Color: N/A
<input type="checkbox"/> Other	DOT/ICC#: N/A	VIN#: N/A
	Owner: N/A	Address: N/A
	Physical Evidence Found: N/A	Witness: N/A Address: N/A
	Test Administered: N/A	Results: N/A By Whom?: N/A Rank: N/A

<input type="checkbox"/> Complainant	Driver's or Pedestrian's Name:	Jailed?: <input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Victim	Address:	Intoxicated?: <input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Subject	Race: Sex: DOB:	DL Number:
<input type="checkbox"/> Runaway	Height: Weight: Hair: Eyes:	Scars, Tattoos, Etc.:
<input type="checkbox"/> Wanted	Occupation:	Home Phone: Work Phone:
<input type="checkbox"/> Arrest	Vehicle Make: Model:	Lic/Yr: State: Color:
<input type="checkbox"/> Other	DOT/ICC#: VIN#:	
	Owner: Address:	
	Physical Evidence Found: Witness: Address:	
	Test Administered: Results: By Whom?: Rank:	

<b>Pursuit:</b>	Time Began:	Time Ended:	Location Began:	Location Ended:
Primary Trooper Involved:	Other Trooper(s) Involved:			
Other Agencies Involved:				
Was Supervisor Involved in Pursuit?:	<input type="checkbox"/> No <input type="checkbox"/> Yes (Name):			
Event Ending Pursuit:	<input type="checkbox"/> Accident <input type="checkbox"/> Stopped <input type="checkbox"/> Escaped <input type="checkbox"/> Other			

<b>Abandoned Vehicle:</b>	Highway Number:	Sheriff Notified?: <input type="checkbox"/> Yes <input type="checkbox"/> No
Towed To:	Address:	Date:
Checked for Stolen?: <input type="checkbox"/> Yes <input type="checkbox"/> No	Stolen?: <input type="checkbox"/> Yes <input type="checkbox"/> No	Owner Contacted and Vehicle Identified?: <input type="checkbox"/> Yes <input type="checkbox"/> No
Does Officer Wish to Contact Owner Before Release?: <input type="checkbox"/> Yes <input type="checkbox"/> No		
Final Disposition:		
Department Records Cleared?: <input type="checkbox"/> Yes <input type="checkbox"/> No	Follow Up Investigation?: <input type="checkbox"/> Yes <input type="checkbox"/> No	

**Remarks:** ON JULY THE 13<sup>th</sup> 2004 AT 0425 AM, I RECEIVED A RADIO MESSAGE FROM GREENWOOD DISPATCH THAT A PEDESTRAIN HAD BEEN STRUCK BY A TRACTOR TRAILER TRUCK ON I-26 EAST BOUND MEDIAN IN NEWBERRY COUNTY BETWEEN THE TWO REST AREAS. UPON ARRIVAL I FOUND A WHITE FEMALE DRESSED IN BLACK CLOTHING LAYING IN THE MEDIAN STATING SHE WAS HIT BY A TRACTOR TRAILER TRUCK. I NOTICED HER CLOTHES WERE NOT TORN OR APPEAR TO HAVE ANY GRASS IN HER HAIR THAT WOULD INDICATE SHE HAD BEEN STRUCK BY A PASSING VEHICLE, NO DEBRIS OR SKID MARKS WERE FOUND AT THE SCENE. NEWBERRY COUNTY E.M.S. ARRIVED AND E.M.T. (CASEY CHAVES) STATED, SHE HAD A BROKEN RIGHT KNEE AND A COMPOUND FRACTURE BETWEEN THE KNEE AND THE ANKLE. THERE WASN'T A ROAD RASH ON HER BODY OR DID SHE HAVE ANY TRAUMA TO HER UPPERBODY THAT WOULD BE CONSISTENT WITH SOMEONE BEING STRUCK BY ANY KIND OF A MOTOR VEHICLE.

(Attach Supplement Report if Necessary)

*Cpl. M.K. Horne*

*7/13/2004*

WHITE - DPS HQ's/Patrol HQ's/State/Police HQ's

YELLOW - Investigating Reporting Officers Report

PINK - Solicitor/Sheriff/Police Chief/Coroner/Wrecker Operator

GOLD - Victim/Subject